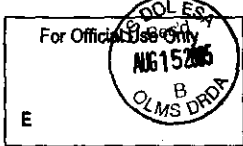


FORM LM-30
LABOR ORGANIZATION OFFICER AND
EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 8363	2. Fiscal Year Covered From: 1 / 1 / 04 Through: 12 / 31 / 04
3. Name and address of person filing. Name Lawrence A. Yosua P.O. Box, Bldg., Room No., if any Street 12420 Jerry, Park City HASTINGS State Minnesota ZIP Code + 4 55033	4. Name, file number, and address of labor organization. Name Teamsters Local 792 Labor Organization File Number 00596 P.O. Box, Building and Room Number, if any Suite 408 Street 3001 University Ave. S.E. City Mpls. State MN ZIP Code + 4 55414
5. Position in labor organization. Secretary-Treasurer	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed	On 8-15-05 Date	612-331-9194 Telephone Number

11.a. Nature of such dealing

<u>Date</u>	<u>Amount</u>	<u>From Whom</u>	<u>Purpose</u>
02/20/04	\$38.95	Bev Drv Trust	1/6/04 Trustee Meeting Meal (1/5th of \$194.77)
05/13/04	\$35.00	Bev Drv Trust	4/12/04 Trustee Meeting Meal (1/10th of \$350.00)
06/17/04	\$915.00	Bev Drv Trust	I.F.E.B.P. Conference Registration
11/16/04	\$1,295.50	Bev Drv Trust	I.F.E.B.P. Hotel Reimbursement
11/16/04	\$40.00	Bev Drv Trust	10/18/04 Trustee Meeting Meal (1/8th of \$320.00)
12/01/04	\$90.00	Sturm & Associates	12/1/04 Meal while at I.F.E.B.P. Conf. (1/5th of \$450.00)